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DENTAL WEAR INTRODUCTION, CAUSES AND MANAGEMENT

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According to our new lifestyle we are facing more cases of dental wear than limiting them. Dental wear can be in different ways with different causes. Abrasion, abfraction, attrition and erosion are the main key elements for this research. Starting with Abrasion and comparing it to Abfraction in the term of diagnoses in symptoms and signs. This manuscript discusses an investigation of the relationship between chemical parameters of popular soft drinks and enamel erosion comparing these drinks and its acidity to tooth. The effects of tooth brushing after exposure to soft drinks are described as a function of the chemical parameters of the drink. A correlation is drawn between the amount of tissue loss caused by erosion, and the extent of the softened layer, in that drinks which cause greater erosion also causes a thicker softened layer. The impact of dental erosion on oral health is discussed. However, it can be concluded that in

most cases dental erosion is best described as a condition, with the acid being of non-pathological origin and how to manage this problem what should we advise our patients and even ourselves. Concluding this by talking about bruxism as a part of the Para functional issue of tooth wear that can occur during sleep or wakefulness and is defined as a repetitive jaw-muscle activity that is manifest as clenching or grinding of the teeth, possibly including bracing or thrusting of the mandible. The clinical consequences of bruxism have been reviewed extensively. A review of the most recent literature has updated the findings on the effects of bruxism on the TMJ and jaw muscles as well as on natural teeth. Management approaches for sleep bruxism (SB) in adults were noted. So in general and in specific points of tooth wear will be the subject.

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